

PTO/SB/21 (09-04)

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FORM**

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Total Number of Pages in This Submission

14

Application Number

09/458,897

Filing Date

December 10, 1999

First Named Inventor

Giammarresi

Art Unit

2617

Examiner Name

Jason J. Chung

Attorney Docket Number

SEDN/047 (533/047)

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Moser, Patterson & Sheridan, LLP

Signature



Printed Name

Eamon J. Wall

Date

8/31/05

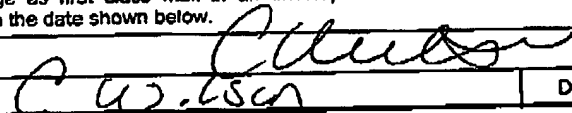
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39,414

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Typed or printed name

C. W. L. S. C.

Date

9-1-05

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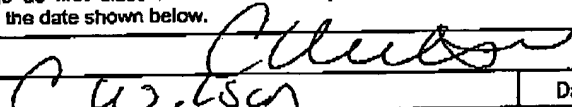
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/458,897
	Filing Date	December 10, 1999
	First Named Inventor	Giammarresi
	Art Unit	2617
	Examiner Name	Jason J. Chung
Total Number of Pages in This Submission	Attorney Docket Number	SEDN/047 (533/047)

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<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Moser, Patterson & Sheridan, LLP		
Signature			
Printed Name	Eamon J. Wall		
Date	8/31/05	Reg. No.	39,414

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Typed or printed name	C. A. Carson	Date	9-1-05

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PATENT APPLICATION

Applicant: **Giammarresi**
Case no.: **533/047**
Serial No.: **09/458,897** Filed: **12/10/99**
Group Art Unit: **2617** Confirmation #: **9422**
Examiner: **Chung, Jason J.**
Title: **METHOD AND APPARATUS OF LOAD SHARING AND
FAULT TOLERANCE IN AN INTERACTIVE VIDEO
DISTRIBUTION SYSTEM**

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Name <u>C. W. Wilson</u>	Signature/Date <u>9-1-05</u>

RESPONSE UNDER 37 C.F.R. 1.116

In response to the final Office Action mailed July 8, 2005, please consider the above-identified patent application as follows.

The Commissioner is authorized to charge any fees due, including excess claim and extension fees, to Deposit Account 20-0782/SEDN/047.